

Sandburg PTA Reimbursement Voucher (2023-2024)

DO NOT FILL IN
Check Date: _____
Check#: _____
Amount: _____

Date: _____

Amount Requested: \$ _____

Make Check Payable to: _____

Send Check to: _____

Budget Line Item: _____

Itemized Expenses (Please provide details):

Receipt/Invoice attached? _____ If not, why? _____

Please submit to:

Leanne Sardiga, PTA Treasurer, lsardiga@gmail.com [Preferred] OR 152 N Avon Road., Elmhurst, IL 60126

Approved by _____ PTA President